



BARBARA K. CEGAUSKE
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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SECRETARY OF STATE
ELECTIONS DIVISION

#3590

State of Nevada
**Committee for Political Action
(PAC)**
Registration Form
Page 1

ABOVE SPACE IS FOR OFFICE USE ONLY

- ☐ New Registration ☐ PAC (Advocating Passage or Defeat of a Ballot Question)
- ☐ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))
- ☒ Amended Registration: ☐ Change Officers ☐ Change Registered Agent ☒ Change Address
check all that apply
- ☐ Change Name ☐ Change Address
Previous Name of PAC
- ☐ Other:

Name of Committee:
United Students, Parents and Teachers

Telephone:
702-324-0404

Mailing Address:
2052 Turquoise Ridge St. #105
Street Name, Number

Las Vegas
City

NV 89117
State Zip Code

PAC Active Email Address:

PURPOSE: Briefly state the purpose for which the PAC was organized.
To support candidates who support a strong public education system.

REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent:
Charles Gallagher

Telephone:
702-506-3782

Physical Address:
2052 Turquoise Ridge St #105
Street Name, Number

Las Vegas
City

NV 89117
State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

X

Signature of Registered Agent

Date:
7-27-2016



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title:

Becky Harris (Director)

Mailing Address:

8242 Sweetwater Creek Way

Street Name, Number

Las Vegas

City

Telephone:

702-324-0404

NV 89113

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization:

Telephone:

United Students, Parents and Teachers

Mailing Address:

2052 Turquoise Ridge St. #105

Street Name, Number

Las Vegas

City

NV 89117

State Zip Code

Name of Organization:

Telephone:

Women's Leadership Alliance

Mailing Address:

2052 Turquoise Ridge St. #105

Street Name, Number

Las Vegas

City

NV 89117

State Zip Code

Name of Organization:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

SUBMITTED BY:

X
Signature of Representative of Group

Printed Name:

Charles Gallagher

Date:

7-27-2016

Telephone:

702-506-3782